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Construction Edition 2018



Commander's Corner

By Marvin L. Jones
Commanding Officer,
NSA Bethesda

NSAB Family – Happy New Year and welcome back! I hope your holidays were safe, memorable and rewarding.

Last January, the NSA Bethesda public affairs team worked with community leaders, our public works department, and the staff at Walter Reed Bethesda to put together The Journal's first ever "Construction Issue."

In it, we shared articles with information about construction projects that were either in progress or due to begin over the next year.

We received a tremendous amount of positive feedback – not only from our base population, but from the local community as well. They found the issue extremely helpful in understanding some of the construction work happening inside our fence line, and associated timelines.

Given that, we're excited to kick-off 2018 with our second annual "Construction Issue."

As I noted last year, the mission of Naval Support Activity Bethesda is centered on customer service. We support the women and men who comprise one of the most unique installations in the Department of Defense. We are home to multiple missions that focus on wellness, healing, education and world-class research.

We're most proud to provide support to those who provide support.



Capt. Marvin L. Jones
NSAB Commanding Officer

As you look through this year's issue, I recommend that you pay particular attention to the construction projects that will impact you personally. Keep this copy nearby and refer to it frequently.

In the following pages, you'll find multiple articles providing detailed information about Walter Reed Bethesda's Medical Center Addition and Alteration plan, including a piece on the new medical annex being constructed on the old G Lot.

On page 3, you'll also find a list of resources where you can subscribe to alerts, updates, and find general information on most of the construction efforts.

As the projects move forward, you can help our team and everyone here at NSAB by being patient, flexible, and vigilant. Please continue to heed advisories and messages from my staff and your organizations about traffic re-routing, gate operations, parking adjustments and other impactful matters.

And, as always, if you see something, say something. During construction, things can get a little chaotic now and then. If something doesn't look right, it's important to report it.

Thank you for your continued patience, understanding, and most importantly, your support. It means the world to us.

I look forward to seeing you around the installation!

Bethesda Notebook

Prostate Cancer Support Group
The Prostate Cancer Support Group meets at Walter Reed National Military Medical Center on the third Thursday of every month. The next meeting will be Jan. 18 from 1 to 2 p.m. and from 6:30 to 7:30 p.m. in the America Building's River Conference Room. Spouses and partners are invited. Military ID is required for base access to WRNMMC. For those without a military ID, call Prostate Center at 301-319-2900 at least four business days prior to event for base access. For more information, contact retired Col. Jane Hudak at 301-319-2918 or jane.l.hudak.ctr@mail.mil.

Children's Dental Health
On Feb. 2 in observance of National Children's Dental Health Month during the month, Walter Reed National Military Medical Center and the Navy Medicine Professional Development Center will perform oral screenings and cavities assessments on all children ages 1 to 12 years with base access (TRICARE eligibility not required) from 8 a.m. to 2 p.m. in the America Building, fourth floor Pediatrics Clinic. The day's event will also include face painting, storytelling and games focused on teaching children good oral habits. For more information, contact Hospitalman Rogers at 301-295-1364.

Retirement Seminar
A two-day pre-retirement seminar for Walter Reed National Military Medical Center Department of Defense GS employees planning to retire within the next five years will be Feb. 6-7 from 8 a.m. to 4 p.m. each day. Location will be sent upon registration, which must be done in advance and space is limited. Topics to be discussed during the seminar include eligibility requirements, survivor benefits, health/life insurance benefits, Social Security/Medicare benefits, income tax, Thrift Savings Plan, and more. Registration can be done at www.wrnmmc.intranet.capmed.mil.

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Naval Support Activity Bethesda

Commanding Officer: Capt. Marvin L. Jones		NSA Bethesda	
Public Affairs Officer: Jeremy Brooks		Fleet And Family Support Center	301-319-4087
Public Affairs Office: 301-295-1803		NSAB Emergency Info	301-295-6246
		NSAB Ombudsman	
		CS3 Danielle Coley	301-400-2397
		NSAB Chaplain's Office	301-319-4443
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		Troop Command SARC	
			301-319-3844
		SARC 24/7	301-442-2053
		SAPR VA 24/7 Helpline	301-442-8225

Journal Staff	
Managing Editor	MC2 William Phillips
WRNMMC Editor	Bernard Little
Writers	MC2 Kevin Cunningham
	Andrew Damstedt
	Kalila Fleming
	MC3 Julio Martinez Martinez
	Joseph Nieves
	AJ Simmons

2018 Construction Timeline

Pedestrian Connector

The pedestrian connector within the medical center is set to be completed in the winter of 2018. It will allow the hospital to maintain full functionality during major construction phases.



MD 355 Crossing work will continue through 2018. It is being built to improve access to the Medical Center Metro station and increase pedestrian safety across MD 355 at Gate 2 (South Wood Rd.)



The outpatient annex is expected to be completed later this year and will support 26 departments from Bldgs. 4, 6 and 8 during the planned demolition and construction.



MCAA South is expected to be completed in 2021 as the replacement for Bldgs. 4, 6 and 8.

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Information and Resources

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WRNMMC Construction Outlook: 2018

By A.J. Simmons
WRNMMC Command Communications

As Walter Reed National Military Medical Center steps into 2018, it also prepares for the continued advancement of the Medical Center Addition and Alteration project (MCAA), which will take significant strides forward over the course of the coming year.

Perhaps the most sizable undertaking over 2018 will be the construction of a pedestrian tunnel that will connect buildings 9 and 19 of the medical center. This connector tunnel is being constructed in preparation for the demolition of buildings 8, 6 and 4 in 2019.

"The pedestrian tunnel is going to be the way that we can transit patients and staff from [buildings] 9 and 10 to the America Building," explained Theresa Lavoie, deputy assistant chief of staff at WRNMMC. Lavoie, a retired Navy nurse and care coordinator who is familiar with the clinical environment, serves as the primary liaison between clinical staff and construction/facilities staff during the MCAA project.

The connector tunnel, Lavoie

elaborated, will remain in place throughout and following the construction project, thereby providing a permanent link between the outpatient and inpatient areas of the medical center.

"The other thing that's happening in 2018 is a significant transition of staff and operations to the temporary Outpatient Annex in the G-Lot," said Lavoie.

The annex will house the departments of Optometry, Ophthalmology, Psychiatric Liaison Services and the Wounded Warrior Clinic, among several others—all of which are currently located in buildings that will be demolished as part of the MCAA. In total, 89 Departments will be relocated throughout the life of the project.

"Why we're doing all of this is to prepare our facility for tomorrow's medicine," Lavoie pointed out. "It's to 'right-size' our medical center and improve the flow of services. The MCAA and all the preparation we're doing is all for our people and our ability to provide high-quality patient care."

She expounded that the MCAA project serves as an integral proponent of the medical center's

mission to be a high-reliability organization that furthers mission readiness.

Lavoie, who was present during the Base Realignment and Closure (BRAC) in 2011, explained that the organization has used lessons learned from that time to ensure that the MCAA is performed smoothly and efficiently with a distinct focus on helping staff and patients not only endure, but thrive within the environment.

As part of this goal, the Unified Construction Coordination Program (UCCP) was established as an effort to operationalize and maintain a mindset of change management, the human experience and patient-centered practices throughout the construction. The program, as Lavoie noted, is also a means of providing everyone at WRNMMC with an outlet to create an active dialogue throughout the construction project.

"We are asking our [staff, patients and visitors] to embrace change, and we're doing this in a way that focuses on not just the functionality of change, but the human experience of change," said Lavoie. "We want to make sure that we acknowledge that this is a challenge for them and

that our team is here to hear those challenges and to mitigate them and to work with them in every way that we can, because we want to make sure that they can continue putting the patient at the center of everything that we do."

The UCCP is also focused on preparing staff and patients for the impacts of the construction on their daily routines, as well as the adjustments that they will need to make in response to the changes to the medical center.

One such routine adjustment, according to Lavoie, is the amount of time that patients will need to consider including between appointments to allow them time to travel between locations on the medical center's campus: "In the past, if you had an Ophthalmology appointment in Building eight and a Gastroenterology appointment in Building nine, you could [schedule them back-to-back]. Patients should anticipate including time—I would say 15 minutes—between appointments so that patients can transit over to the Outpatient Annex."

Lavoie also noted that the UCCP and the Integrated Referral



VIEW AT BROWN DRIVE ENTRANCE CANOPY

Management Center will aim to advise patients as to where the most convenient parking locations are in relation to the clinic they will be visiting for an appointment.

According to Lavoie, the most common questions and concerns expressed to the UCCP regard daily life within the medical center. One such question levied at the program is whether food and coffee will be available in the Outpatient Annex. Fortunately, Lavoie reports, the UCCP was able to coordinate with the Navy Exchange, which will provide a “coffee and sandwich shop” in the annex.

“So if you’re [in the Outpatient Annex] for multiple appointments or for a long day, you don’t have to come across the street to get food. I think that’s a great staff-enhancer and inpatient-enhancer for their experience,” said Lavoie.

Another consideration being made in preparation for and during the 2018 construction is in regards to the safety of staff, patients and visitors. Lavoie noted that the traffic on North Palmer Road has been closely observed, as it is the crossing location between the America Building and the Outpatient Annex. These observations will be used to help establish the safest method for moving between buildings.

Additionally, Lavoie explained that the number and frequency of shuttle stops will be increased to ensure that patients can safely



VIEW AT SOUTH COURTYARD

and comfortably move between buildings and parking lots while at WNRMMC.

“We’re enhancing the environment to improve quality and awareness while engaging [staff and patients] in the process,” said Lavoie in summation. “Anything that we can do to help the change process for individuals is important to us.”

More information about the MCAA project and the work of the UCCP, as well as sources for contacting and engaging with construction can be found at the monthly Town Hall Meetings, the Construction Newsletter, through the Construction Hotline and via the multidisciplinary communications email team. All of these sources

can be found on the Construction Quick Link on the WRNMMC intranet page. Joining this, Lavoie and her team are available to meet with departments and provide informational updates.

Visit the Construction webpage at go.usa.gov/xnVzV or call the construction communications hotline at (301) 400-1934.

Construction in 2017 Preps NSAB for MCAA Project

By Andrew Damstedt
The Journal

In 2017, several construction projects moved forward and others were completed as Naval Support Activity Bethesda (NSAB) readied for the upcoming Walter Reed National Military Medical Center (WRNMMC) Medical Center Addition and Alterations (MCAA) project.

“Bethesda is looking good for the future,” said Andy Buzbee, Naval Facilities Engineering Command (NAVFAC) Washington Project Management and Engineering Branch Head said. “DHA (The Defense Health Agency) is investing in this installation.”

Pedestrian Connector

Some of the preparatory work for the MCAA made significant progress. One project was the utility relocation project, which is almost complete. It consists of installing new and replacing existing utilities, but the project ran into some unforeseen conditions such as hitting harder rock than expected, Buzbee said.

The same contractor doing the utility relocation work was awarded the contract for a pedestrian tunnel between Bldgs. 9 and 19, Buzbee said. Construction on the project is set to start in early 2018.

“It allows for a smooth turnover between the projects, minimal mobilization time and also allows for some efficiency with crew sizes and some of the permitting,” Buzbee said.

Brown Drive traffic flow was affected during that project and is expected to be affected again when the base communications center construction starts. The center will be built between Buildings 54 and 55. Another part of that project includes installing three new generators.

Outpatient Medical Annex

Construction of the outpatient medical annex, which will house relocated departments from the medical center during the MCAA project, started and is expected to be complete in 2018.

The 124 modules to construct the annex on the G-lot were transported across base with minimal disruption, Buzbee said.

“It was a major success transporting these 12 modules from Perimeter Road and right down through one of the most congested parts of the base on North Palmer Drive,” Buzbee said. “I would be surprised if anybody really reflected back and thought ‘That was really a pain.’ It went incredibly smooth from our side.”

Departments are expected to move into that building later this year.

Bldg. 57 Parking Garage

Completing the parking garage was another major achievement, Buzbee said.

The new structure was built on the former H-lot and opened in October. Putting up the 268 reinforced precast concrete panels went up pretty quickly with between 8 to 12 panels being put up a day, Buzbee said.

NSAB was “very supportive and cooperative and allowed that construction to happen with minimal detours for the traffic.”

Construction on the project for the parking garage



PHOTO BY MC3 JULIO MARTINEZ MARTINEZ

The Bldg. 57 parking garage was one of the construction projects completed on Naval Support Activity Bethesda in 2017.

went “very well,” said Elie Naanouh, NAFVAC engineering technician.

The 6-level parking garage has 650 spaces, including 14 handicapped spaces, with 48 spaces around the garage.

Other Projects

Another project included replacing around 1,500 windows in Bldgs. 9 & 10. The windows were replaced and the exterior of the buildings were cleaned and repaired, according to Montez Miller, NAVFAC construction manager for the project.

The historic bronze doors of Bldg. 1 were refurbished offsite. Temporary doors were installed from August to October 2017 while the work took place, according to WRNMMC.

The medical center’s Neonatal Intensive Care Unit renovation was completed in 2017, which included new flooring, paint and ceiling tiles as well as upgrades to patient rooms and restrooms.

Work is almost complete on a new trail that runs along Stony Creek. A couple of sections still need to be paved, but the trail’s impetus was to allow patients a place to get into nature and heal, Buzbee said.

A project to replace two chillers that are part of a system to supply chilled water to provide cooling for the base was awarded in 2017. That project is set to be designed in 2018 and work completed in 2019, Buzbee said.

Buzbee said 2018 should also include completion of the WRNMMC utility tunnel and annex. The pedestrian connector should be completed in early 2019 and the MCAA project is expected to be awarded that same year.

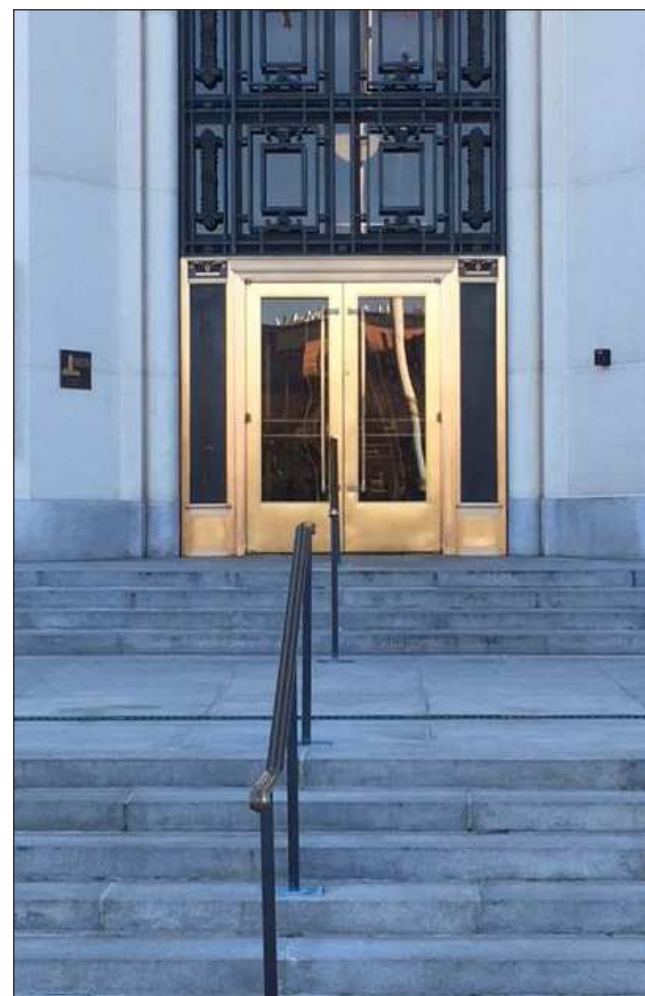


PHOTO COURTESY WRNMMC

The Walter Reed National Military Medical Center historic bronze doors in Bldg. 1 were refurbished in 2017.



PHOTO BY MC3 JULIO MARTINEZ MARTINEZ

The construction of the Outpatient Annex in preparation of Walter Reed National Military Medical Center's construction project continues on Jan. 9.

Outpatient Annex Set to Open in 2018

By MC2 William Phillips
NSAB Public Affairs

Walter Reed National Military Medical Center (WRNMMC) is set to demolish, then rebuild the architecture that houses the flagship of military medicine.

"We have a significant construction project coming up over the next seven years called the Medical Center Addition and Alteration (MCAA) Project," said Terri Lavoie, deputy assistant chief of staff in charge of Unified Coordination Program. "We will be demolishing one-third of the medical center while we maintain 100 percent functionality."

WRNMMC plans to centralize many of its departments after MCAA is complete.

"We will be centralizing certain functions," Lavoie said. "We didn't have the option to do that because of our physical layout before."

She added the project is already underway.

"The first part of the project is called P-114, which is the pedestrian connector," said Lavoie. "The second

part of the project is 'set two' which is the demolition and construction."

Since one-third of the medical center will be demolished, there must be a place for displaced departments to go.

"We can't just put them out on Brown Drive," explained Lavoie.

That's where the outpatient annex comes in.

"Twenty-six departments from Buildings 4, 6 and 8 will be relocated to the outpatient annex in fall 2018," Lavoie said. "This 100,000 sq. ft. annex was constructed in its entirety off site in Pennsylvania."

The annex was assembled in the G lot during the summer of 2017.

"The annex was delivered module by module for a total amount of 124 modules," Lavoie said.

Keeping the operational space was a primary project goal.

"Some departments are losing some storage space, but Defense Health Agency, Walter Reed Bethesda and all the planners of this made sure that all the departments aren't losing any operational space when they go to the temporary facility," Lavoie said.

Lavoie said traditionally, when a

department in the government is moving to a temporary facility, they lose about 20 percent of their space.

"We are asking departments as they prepare to move to downsize," Lavoie said. "It's just like when you are preparing to move when you PCS, you go through your stuff and get rid of things you didn't use or won't use."

Departments will be moved in two phases.

"We are doing construction in a phased effort," Lavoie said. "In total the first move will consist of 26 departments. The majority of the departments that are relocating to the annex in the first phase will actually stay there for the entire duration of construction. Twenty-three departments will be staying in the annex for the [duration of construction]."

"For the second phase, we are relocating departments from buildings 7 and 2," Lavoie said. "We will be moving them into the annex, and then demolishing buildings 7 and 2. When construction is finished we will relocate all of the departments that are housed in the annex back into the hospital into their new location, which is MCAA North."

Other departments that are spread throughout the hospital will be moving to their permanent location when construction is complete, creating a more centralized approach to where departments are located — departments will be closer to similar departments.

Employees and visitors will have access to refreshments at the outpatient annex.

"One of the main concerns that the staff had was they want to have a place where they can get refreshments without having to go all the way to the Main Street or the Warrior Café," Lavoie said. "To be able to get food or drinks in the annex will be very beneficial for everyone. It can take a lot of time and energy to navigate the hospital or walk all the way to the Warrior Café."

Lavoie said the medical center has heard those concerns and is working with the Navy Exchange to secure vendor contracts for the outpatient annex so employees and visitors have access to refreshments.

For more information contact Terri Lavoie at theresa.m.lavoie4.civ@mail.mil.



IMAGE COURTESY OF CLARK CONSTRUCTION GROUP

MD 355 Crossing is expected to be completed in 2021. It is being built to improve access to medical center metro station and increase pedestrian safety across MD 355 at Gate 2 (South Wood Rd.)

Progress to Continue on MD 355 Crossing Project through 2018

By Jeremy K. Brooks
NSA Bethesda Public Affairs

Construction began on the long-awaited Maryland 355 Crossing Project last year. The project will create a pedestrian tunnel underneath Maryland 355 between the Medical Center Metro Station entrance and the Gate 2 entrance of NSA Bethesda. It also includes a tunnel connecting the Medical Center Metro Station underground

entrance with elevators on the opposite side of the road. Throughout the latter part of 2017, crews worked around the clock to surgically blast away rock as the necessary holes for the final product began to take shape. According to Montgomery County BRAC/Military Installations Coordinator Phil Alperson, the blasting will continue into 2018. That blasting will make way for the next phase of work. “If all goes well,” he said, “the Montgomery

County Department of Transportation (MCDOT) will make progress in underground construction, connecting the deep elevator shaft to the Metro mezzanine and beginning to build the related WMATA (Metro) infrastructure so elevator users will be able to get into the Metro station.” “MCDOT will also make further progress on the shallow pedestrian underpass,” he added, “including construction of elevators.” Alperson said the project is currently on schedule to be completed in late 2021.

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Tunnel to be Built for Pedestrian Use

By MC3 Julio Martinez Martinez
NSAB Public Affairs

Throughout 2018, Walter Reed National Medical Center (WRNMMC) is planning to tackle the problem of transporting patients while accommodating building configuration changes resulting from ongoing hospital construction.

Due to planned demolition of several buildings, a way to transfer patients around the hospital has to be implemented. After a lot of discussion and consideration the solution is underway.

"It's a permanent tunnel for the hospital," said Terri Lavoie, deputy assistant chief of staff, in charge of the hospital's Unified Construction Coordination Program. "Although we're constructing the tunnel for this purpose, we will be able to have that tunnel after construction and plan to maintain it forever. It will be a permanent basement level connection from Bldg. 9 all the way to Bldg. 19."

The tunnel — running under the hospital — is for transferring patients as needed so their medical care can continue without interruption.

"Although we're constructing the tunnel for this purpose, we will be able to have that tunnel after construction and plan to maintain it forever," said Terri Lavoie, WRNMMC deputy assistant chief of staff.

According to Lavoie, it should allow the hospital to maintain full functionality during the planned construction phase.

"In managing this change, we have focused on how it impacts patients and staff," said Lavoie. "Sometimes projects like this tend to focus more on timelines and don't pay close enough attention to how it impacts people; so for this project we're asking ourselves those important questions that help maintain the patient and staff's voice throughout the construction."

It will be used during the demolition of Bldgs. 2, 4, 7 and 8, which will be replaced by one new building, Building C. The connector

helps by allowing the patients to be transferred without going outside. Without the tunnel, this would be impossible.

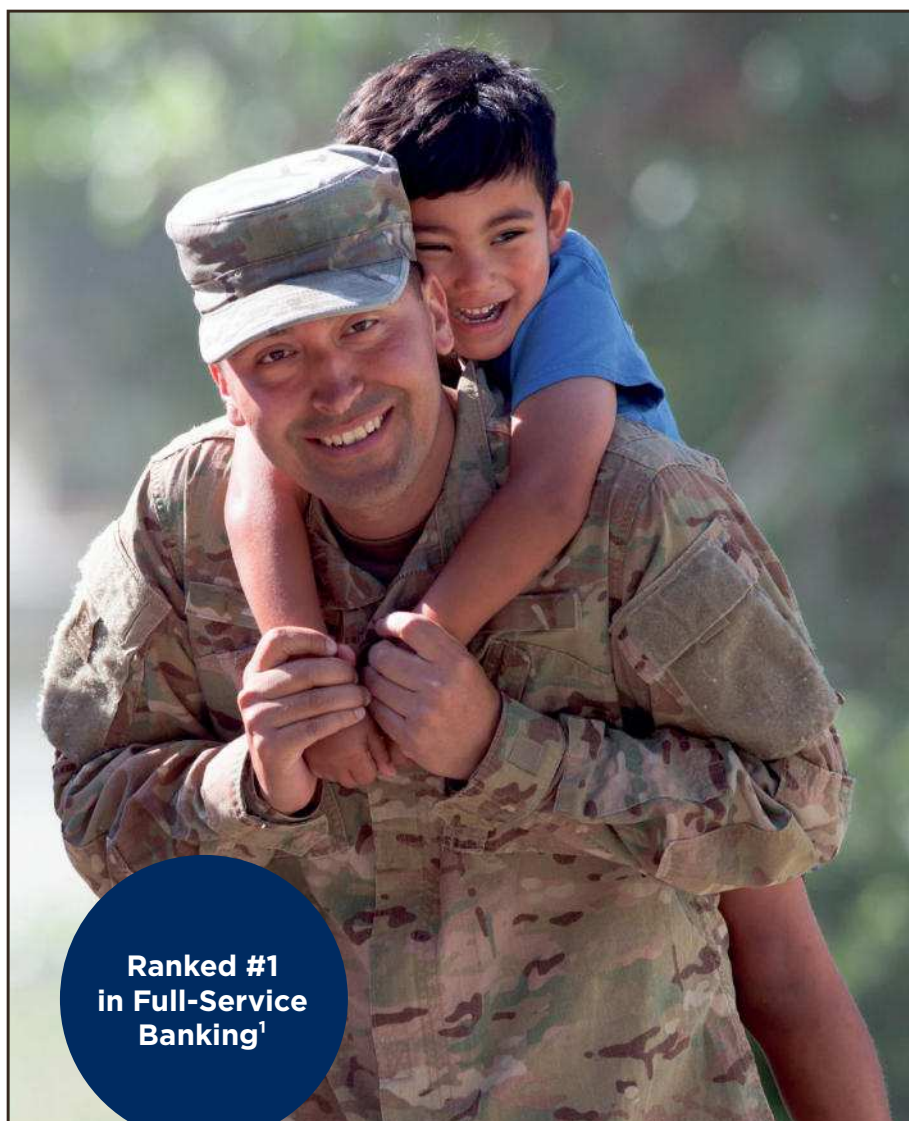
One of the major project challenges was taking into consideration preservation requirements for Bldg. 1, which is considered a historic landmark.

"The pedestrian tunnel will go under the stem of Bldg. 1 so it does go physically under the building and the reason that they did that is if they put the pedestrian tunnel straight across in a linear pattern there would have been communication lines and utility lines that would have been in the way," said Lavoie. "There is an

opened up area already in place due to a previous project so now that the pass is clear the tunnel can be constructed without having to relocate any utilities for Bldg. 1 that would be in the way."

The staff and patients will both be able to use the connector for more efficient medical treatment, during a phase of the MCAA where without it the operational readiness of WRNMMC could be severely hindered. The connector is set to become a vital part of hospital traffic.

The construction of the tunnel began in December 2017, with a projected completion date of winter 2018.



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Crosswalk Use Encouraged to Increase Pedestrian Safety

By Andrew Damstedt
The Journal

"Use the crosswalk."

That's the message Naval Support Activity Bethesda Safety Officer Paul Phillips would like to get across to pedestrians walking through the installation.

"We have so many crosswalks on this base; it's just people choose not to use them," he said. "There's a huge issue with personnel walking on the base that don't use crosswalks."

He said people may be crossing the street illegally because it's easier than walking the extra steps to use a crosswalk.

"Please use the crosswalks that have been provided," Phillips said.

With ongoing and upcoming construction, Phillips said pedestrians should be aware of where roads and sidewalks have been blocked off or rerouted. Also, be aware of areas where work has created uneven pavement to avoid slips, trips and falls, he said.

"If there's a piece of sidewalk that's closed – adhere to that – don't just traverse through it because it's the shortest route from point A to point B," he said.

He said people should make eye contact with drivers before crossing the street.

"Just take a second to look left, look right, and make sure that it's clear to cross the road before crossing," he said.

When walking on base at night or early morning when it's still dark, Phillips said people should either wear light colored clothing or carry a light to alert drivers of their presence when crossing the street.

He had several more safety points to add. Don't text while crossing the street, he said.

"Take two minutes, put your phone down and pay attention; cross the street and continue on," Phillips said.

Drivers shouldn't use cellphones when driving on base either, he said.

Be aware of your surroundings, which Phillips noted includes removing headphones.

"Running, jogging or walking with headphones in contributes to you not always hearing your surroundings," he said. "So when walking up to a crosswalk or street, you may not hear oncoming traffic or a vehicle coming down the road."

In parking garages or parking lots, pedestrians should look out for vehicles backing up and drivers should be aware of pedestrians, he said.

"Use the crosswalks that have been provided, you'd be hard pressed to find anywhere on this installation going from one side to the other side that you can't find a crosswalk," Phillips said. "Statistically speaking, drivers will normally pay more attention if they know there's a crosswalk coming up."

Pedestrian Safety Quick Tips

- Use Crosswalks
- Put Cellphones Away When Crossing the Street
- Make Eye Contact With Drivers Before Crossing
- Be Aware of Detours and Closed Sidewalks
- Don't Use Headphones While Walking on Base
- Carry a Light During Nighttime, Early Morning
- Wear Bright, Reflective Clothing
- Only Hands-free Cellphone Use While Driving
- Never Rely On a Car to Stop

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1/16	varies	Mission Slimpossible Begins-8 weeks MWR Fitness Center, Bldg. 17 \$25 Register online-includes group training and Mission Nutrition classes
1/17	5-8 pm	Wine and Weave Snowflake Basket Below Deck, Bldg. 64 \$15 for one, \$27 for two Register online early, class size is limited.
1/18	4-6 pm	Winter Warm-Up Social Below Deck Pub, bldg. 64-NGIS lounge Free appetizer buffet (while supplies last) Live music and fun!
1/21	12-3 pm	WINTERFEST, Location update! MWR Fitness Center-INDOORS! Ice Skating, Bounce House, Crafts, Food Concessions, Prizes FREE EVENT! Open to all with base access.
1/22	5:15 pm 6:15 pm 7:15 pm	Intramural Basketball Begins Mondays, Tuesdays, Wednesdays MWR Fitness Center, Bldg. 17
1/23	11:30 am	Mission Nutrition Begins-March 13 Free 8-week nutrition class! Register online.
1/23	11:30 am 12:15 pm	Over 35 Intramural Basketball Begins Every Tuesday and Thursday MWR Fitness Center, Bldg. 17

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1/13 Intro to Skiing
8 am-5 pm
Roundtop Mountain Resort \$47

1/14 Football Playoffs
Noon Liberty Center, Bldg.11
Free Snacks!

1/17 Board Game Night
6 pm Liberty Center

1/19 Commissary Run
4:30 pm Leaves from Bldg. 62
lobby

1/20 & 1/27 Snow Tubing
9 am-3 pm
Heritage Hills, Pa. \$25

1/26 Movie Night/Hot Cocoa!
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Shuttle 101: Fast Facts About NSAB Shuttle System

By MC2 William Phillips
NSAB Public Affairs

Depending on weather and other factors, between 270 and 400 people ride the approximately 2.5 miles of shuttle lines on Naval Support Activity Bethesda (NSAB) each day.

Before the current NSAB shuttle system, shuttles would take long drawn out routes around the base.

“Ten years ago, there were only two shuttles onboard and they would take long routes that took an hour or more to go; it wasn’t very customer friendly,” said Ryan Emery, NSAB transportation officer. “The shuttle bus onboard is really geared for and paid for to move patients around the base.”

The mission of the shuttle system is to get patients to their appointments, but staff members may ride as well.

“The buses will have a color on the side of it to let riders know what route they are on,” said Emery.

Despite its relatively small footprint, NSAB is packed with more than 40 entities spread across 240 acres.

“If you think about the size of the

campus, and the need to move people from point A to point B, it helps to move those that have mobility and access issues in an efficient manner,” Emery said. “For example, if you are staying at NGIS as a guest and you need to get to the hospital because you’re here for treatment, it connects the lodging that is on the other side of the installation to the hospital.”

The shuttles act as a ‘last mile’ connection and that’s why the main hubs are in the hospital. The main hubs for the hospital are Bldgs. 10 and 19 due to them being high traffic areas in the hospital.

NSAB plans to use the existing shuttle system when the Medical Center Outpatient Annex is completed.

“The contract allows for modification and additional stops along the routes,” Emery said. “That will help with some of the concerns that people have moving them to this new building that is not connected to the hospital but still does provide medical care.”

The system is comprised of multiple lines running routes that cater to most of the installation.

“There are several lines to move

patients, but there are availabilities for staff members to ride on the shuttle,” said Emery. “The most popular route starts at the Metro and goes to Bldg. 10 and it’s designed for patients who are using the Metro to get to the hospital for treatment.”

The shuttle to the Medical Center Metro runs from 5:30 a.m. to 6:30 p.m.

The Red and the Green lines operate during the morning and afternoon rush hours, from 5 a.m. until 9 a.m. and from 2:30 p.m. to 6:30 p.m.

The Blue line has the most stops and goes all over the base.

“The Blue line is designed to touch all of the service oriented locations — like the Fisher House, Navy Lodge and Navy Gateway Inns and Suites — and connect them to the hospital,” Emery said. “The Blue line runs from 5 a.m. to 6:30 p.m. because the majority of that time [is] when the patients and the staff are here.”

According to Emery the stops are primarily in areas with high pedestrian traffic like Bldgs. 17 and 19.

All shuttles are handicap accessible and hold anywhere from 20 to 24 passengers.

For more information please contact Ryan Emery at ryan.d.emery3.civ@mail.mil

Snapshot

Multiple Lines:
Red, Green, Blue, and Metro

Main Hubs:
Bldgs. 10 and 19

Summary: The primary mission of the shuttle system is to get patients to their appointments, but staff members may ride as well.

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